

United Health Foundation 2004 Ranking - Utah

Utah is the fifth healthiest state in 2004 according to the United Health Foundation's (UHF) America's Health, State Health Rankings, 2004 report. Utah was ranked third in 2003 and has consistently been in the top 10 healthiest states over the 15 years of this report.

The rankings symbolize much of the valuable work done in public health, but public health recognizes the influence and contributions of the entire health care system in helping Utahns stay and become healthy. Utah is fortunate to have prominent community, family and environmental supports that often lead to healthier behaviors as well as a solid framework of medical care options that allow for life-saving and life-improving procedures.

The Utah Department of Health (UDOH) is pleased that Utah is consistently ranked as one of the healthiest states in the nation. However, the report's rankings are based on a chosen set of indicators/measurements. There are hundreds of indicators for health and several other national reports that gauge health status differently.

UDOH Context on Selected Rankings:

Prevalence of Smoking – Ranked #1

Tobacco use is still a leading preventable cause of death in Utah. Tobacco kills about 1,200 people in Utah each year, and approximately 190,000 people in Utah smoke. Although tobacco use is still a major public health problem in Utah, UDOH is encouraged to see that anti-tobacco efforts funded by the Utah State Legislature have met with success over the past decade. Programs and services such as the "The Truth" media campaign, community education programs, and the Utah Tobacco Quit Line (1-888-567-TRUTH) have encouraged Utah youth to avoid tobacco and have provided many of the thousands of Utahns who want to quit with the help they need. UDOH aims to continue its work to maintain and further decrease Utah's comparatively low tobacco use rates, especially among groups of people with disproportionately higher rates.

Definition: Percentage of population over age 18 that smokes on a regular basis. This is an indication of known, addictive, health-adverse behaviors within the population.

Cancer – Ranked #1

The overall cancer mortality rate in Utah has been consistently below the U.S. rate. In particular, Utah's mortality rate for lung cancer is dramatically lower than that of the U.S. According to data from the American Cancer Society, Utah's lung cancer death rate from 1995 to 2002 was less than half that of the U.S. In January 2003, the Utah Cancer Control Program (UCCP) began the Utah Cancer Action Network (UCAN), a statewide partnership of public and private organizations whose goal is to reduce the burden of cancer. The mission of UCAN is to lower cancer incidence and mortality in Utah through collaborative efforts directed towards cancer prevention and control. Starting in March

2003, UCAN launched media campaigns to encourage screening for colon cancer and to educate Utahns about skin cancer prevention. In addition, the UCCP provides free to low cost clinical breast exams, mammograms, pelvic exams, and Pap smears to women who meet age and income guidelines. Women with abnormal screening exams are offered diagnostic evaluation by participating program providers

Definition: Number of deaths due to all causes of cancer per 100,000 population. This is an indication of the toll cancer is placing on the population.

Cardiovascular Deaths – Ranked #3

Utah is ranked #3 for the second year in a row, despite a slight increase in cardiovascular deaths. Many factors may affect the overall decline in cardiovascular disease mortality. They include more effective preventive and medical treatment, more emphasis on reducing controllable risk factors (high blood pressure, high blood cholesterol, smoking, physical inactivity, overweight and obesity, and diabetes), and better treatment for heart attack and stroke patients.

Utah is one 32 states funded by the Centers for Disease Control and Prevention to develop a statewide cardiovascular health program that supports all aspects of heart disease prevention and control, including public awareness; more effective policies and environmental supports to promote healthier lifestyle choices in schools, worksites, communities, and health care sites; and extensive public, patient, and professional education.

Utah attributes some of its progress to the availability of funding for this program. More than 90 percent of all Utah adults have had their blood pressure checked, and 63 percent have had their cholesterol tested. In addition, Utah's smoking rate is the lowest in the country. Twenty-six percent of Utahns are physically active compared to the national average of 22 percent and the regional average of 24 percent. Although only 20 percent of Utah adults report eating five servings of fruits and vegetables per day, this is an increase from 18 percent in 1994.

Definition: Number of deaths due to all cardiovascular disease, including heart disease and strokes, per 100,000 population. This is an indication of the toll that these types of diseases are placing on the population.

Infant Mortality – Ranked #7

Utah has been in the top 10 best ranked states for many years. Utah's infant mortality rate in the report is 5.3 garnering Utah the 7th lowest rate in the nation. Utah has a low infant mortality rate which is probably due to an overall healthy population as evidenced by the state's ranking of third in the nation, low alcohol and tobacco use, and exceptional perinatal and neonatal health care providers and facilities.

Definition: Number of infant deaths (before age 1) per 1,000 live births. This is an indication of the prenatal care, access and birth process for both child and mother.

Total Mortality – Ranked #7

UDOH reports 13,341 deaths to Utah residents in 2003 – 299 more deaths than the previous year. The top 10 causes of death for 2003 are in the same order as 2002.

1. Heart diseases
2. Cancer
3. Strokes
4. Unintentional Injuries
5. Lower respiratory diseases
6. Diabetes Mellitus
7. Influenza and pneumonia
8. Suicide
9. Alzheimers
10. Kidney diseases

Definition: Number of deaths per 100,000 population. This is an overall indicator of health of a population as it measures death from all causes.

Motor Vehicle Deaths – Ranked #10

The motor vehicle death rate (per 100 million miles driven) decreased slightly in Utah from 1.4 in 2003 to 1.2 in 2004. This total is the 2nd lowest yearly rate ever in Utah and is below the national rate of 1.5. Decreases in the fatality rate per miles driven since 1990 may be contributed to a combination of factors specific to Utah, including:

- 1) an increase in driver and front seat passenger safety belt use from 39 percent in 1990 to 85 percent in 2003
- 2) an increase in safety restraint use by infants and children up to age 2 from 78 percent in 1993 to 97 percent in 2001
- 3) an increase in safety restraint by children ages 2 to 10 from 49 percent to 82 percent during the same period
- 4) an increase in vehicles equipped increased with airbags
- 5) the passage of graduated driver licensing laws and secondary seat belt enforcement laws
- 6) the passage of numerous DUI laws
- 7) increased law enforcement efforts
- 8) increased education efforts from the Utah Department of Public Safety and state and local health departments
- 9) improved emergency medical services (EMS) response and trauma system
- 10) improvements in road design.

Definition: Number of deaths per 100,000,000 miles driven in a state. It is a proxy indicator for excessive drug and alcohol use within a population.

Infectious Disease – Ranked #13

Utah's infectious disease status has improved significantly from 1990 to 2004. The primary reason is that the number of hepatitis A cases declined significantly in Utah since 1990. The continued use of public health prevention measures and prompt interventions should result in further declines in the number of Utah citizens suffering from these diseases. Utah has become a leader in improving detection and response to infectious disease reports. Utah has also had a decrease in the number of new AIDS cases. This can be partly due to the effectiveness of HAART (highly active antiretroviral therapy). HIV positive individuals are being treated prior to progressing to an AIDS diagnosis. Additionally, with the Centers for Disease Control and Prevention's initiative

“Advancing HIV Prevention: New Strategies for a Changing Epidemic,” increased testing of high-risk individuals is identifying HIV positive individuals who then receive medical care at an earlier stage of their disease.

Definition: Number of AIDS, tuberculosis and hepatitis cases reported to Centers for Disease Control and Prevention per 100,000 population. This is an indication of the toll that infectious disease is placing on the population.

Obesity – Ranked #15

This year's report of 20.8 percent represents a steady rise in obesity since 1989 (the first year data are available), consistent with the rest of the nation. Utah's rate was 19.1 percent in both 2000 and 2001 and had a slight dip to 17.5 percent in 2002.

Despite the fact that Utah is ranked 15th in the nation for obesity prevalence, the UDOH Heart Disease & Stroke Prevention Program has been recognized nationwide for its efforts to "change the conversation" from one about obesity to one about increased opportunities for regular physical activity and healthy eating at school, at work, and in the community. The Gold Medal School Initiative now ensures at least 90 minutes of physical activity and healthy nutrition for 60,000 elementary students across the state. The Alliance for Cardiovascular Health in Utah recently received the Trails for Health Award from the American Trails Association for its efforts to improve, connect, and promote trails throughout Utah.

Definition: Percentage of the population estimated to be obese, with a body mass index (BMI) of 30.0 or higher. Obesity is known to contribute to a variety of diseases, including heart disease, diabetes and general poor health.

Lack of Health Insurance – Ranked #20

The ranking improved from 34th in 2002 to 20th in 2004 and the UDOH believes this is partly due to innovative new state health care insurance programs such as the Primary Care Network and Covered at Work. UHF used national data to estimate Utah's uninsured rate at 12.7 percent. However, the UDOH uses a larger, more detailed survey that shows the state's uninsured rate at 9.1 percent for 2003; the rate is 7.2 percent for 18 and under.

Definition: Percentage of the population under age 65 that does not have health insurance privately, through their employer or the government. This is another indicator of the ability to access care as required, especially preventive care.

Adequacy of Prenatal Care – Ranked #49

Utah ranks 49th in the nation for adequacy of prenatal care, defined as the percent of pregnant women who entered prenatal care in the first trimester and had an appropriate number of visits throughout pregnancy. The UHF's 2004 report indicates that only 60.6 percent of women received adequate prenatal care in Utah based on birth certificate data, 3.8 percent increase from 2003. Utah's poor ranking in this measure is an important issue the UDOH has been working on. Although the low ranking in adequacy of prenatal care is very concerning, Utah's pregnancy outcomes are much better than the national average, with Utah's seventh best ranking in infant mortality in the nation.

The UDOH has conducted a study to identify reasons for the low adequacy of prenatal care among Utah women. Data have indicated that two-thirds of women with inadequate care entered care early but did not have an adequate number of visits, while the other third entered prenatal care after the first trimester. Women who entered care during the first trimester resemble the general population, however, women who entered care late have characteristics considered high risk for poor pregnancy outcomes, such as younger age and lower educational and socio-economic levels.

Several reasons for inadequate care have been identified that will need to be addressed through various strategies:

3 out of 10 women do not see a health care provider in their first trimester because:

- § They do not have money to pay for prenatal care
- § They have no or inadequate insurance (Utah has the lowest Medicaid income eligibility level for pregnant women at 133 percent of federal poverty level, while many states are at 185 percent of poverty)
- § They did not realize they were pregnant until after the first trimester

7 out of 10 women started prenatal care early but did not have enough visits because:

- § This is not their first pregnancy, they feel fine and believe that missing an appointment here and there is not a problem
- § All of their visits are not recorded on the birth certificate due to incomplete prenatal records because they switched providers during the pregnancy

UDOH continues to examine the reasons for Utah's low level of adequate prenatal care. The Department has worked to develop new media messages to target women through the Baby Your Baby campaign. Better health education related to early signs and symptoms of pregnancy and the importance of early and regular prenatal care is needed since some women do not recognize signs of pregnancy during their first trimester. The Department has also worked to resolve the missing prenatal visits due to incomplete records when women switch providers during pregnancy.

Definition: Percentage of pregnant women receiving adequate prenatal care, as defined by the Kessner Index. This measures how well women are receiving the care they require for a healthy pregnancy and development of the fetus.

The percentage of the total state health budget allocated to public health. This is an indicator of the priority public health has among other health programs within a state.

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